



# Incident Report

**Print Date/Time:** 07/10/2016 18:30  
**Login ID:** ss0139

Lake Stevens Police Department  
**ORI Number:** WA0311900

**Incident:** 2016-00013081

**Incident Date/Time:** 7/6/2016 3:03:00 PM  
**Location:** 7110 9TH ST SE  
LAKE STEVENS WA 98258  
**Phone Number:** (425) 327-2085  
**Report Required:** No  
**Prior Hazards:** No  
**LE Case Number:**

**Incident Type:** Collision  
**Venue:** Lake Stevens  
**Source:** 911  
**Priority:** 1F  
**Status:** 1  
**Nature of Call:**

## Unit/Personnel

Unit	Personnel
19D2	SS0132-Kilroy
19D3	SS0134-Lyons
19R1	SS0133-Heinemann
19S15	SS0072-Aukerman

## Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	ROSENCRANS, TRAVIS		(425) 327-2085			

## Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle						A14800F	

## Disposition(s)

Disposition	Count
M	1

## Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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## CAD Narrative

07/06/2016 : 15:20:47 SP0166 Narrative: 19R1 - TOP NOTCH TOWING ENRT

07/06/2016 : 15:16:55 SP0166 Narrative: 30-40 YARDS OFF OF SR 204 ,INTO PLANTS, NOT DRIVABLE, NEED A TOW TRUCK - 40 YARDS OFF OF ANY ACCESS POINT FOR A TOW

07/06/2016 : 15:15:01 SP0325 Narrative: 1 RED

07/06/2016 : 15:13:17 SP0226 Narrative: LR/226

07/06/2016 : 15:10:29 SP0325 Narrative: 1 PU INTO BARRIER W/MODERATE DMG PT CONS

07/06/2016 : 15:09:17 SP0166 Narrative: 1 MALE , BREATHING, SEVERE LAC TO FOREHEAD

07/06/2016 : 15:07:49 SP0166 Narrative: ARRIVING WITH AID

07/06/2016 : 15:07:32 SP0166 Narrative: AA

07/06/2016 : 15:07:12 SP0226 Narrative: RP EMPLOYEE, NOT WILLING TO GET CLOSE TO CHECK THE CAR, THEY ARE CHECKING AND SECURING THEIR BLDG

07/06/2016 : 15:05:59 SP0226 Narrative: RP SAYS VEH IS VERY DAMAGED, OCCUPANT APPEARS TO BE BREATHING

07/06/2016 : 15:05:46 SP0166 Narrative: BRCST

07/06/2016 : 15:05:19 SP0226 Narrative: CAR INTO THE TREATMENT, PLANT, NO ONE GETTING OUT.

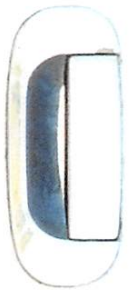








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ORIGINAL

























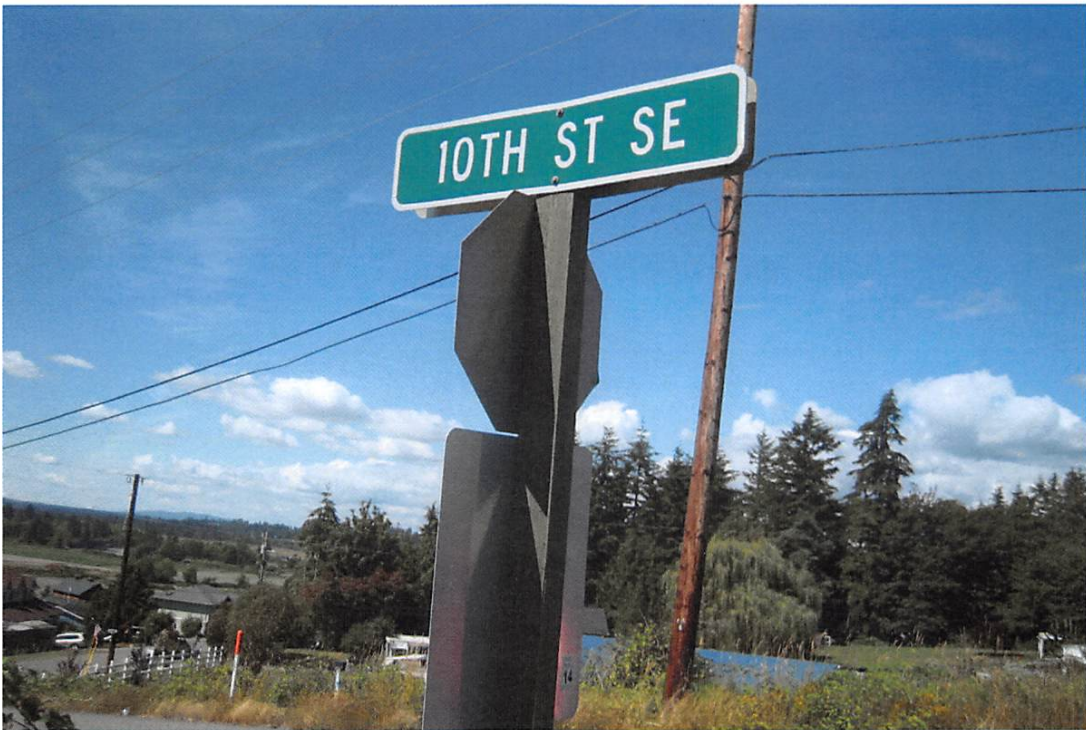












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ORIGINAL





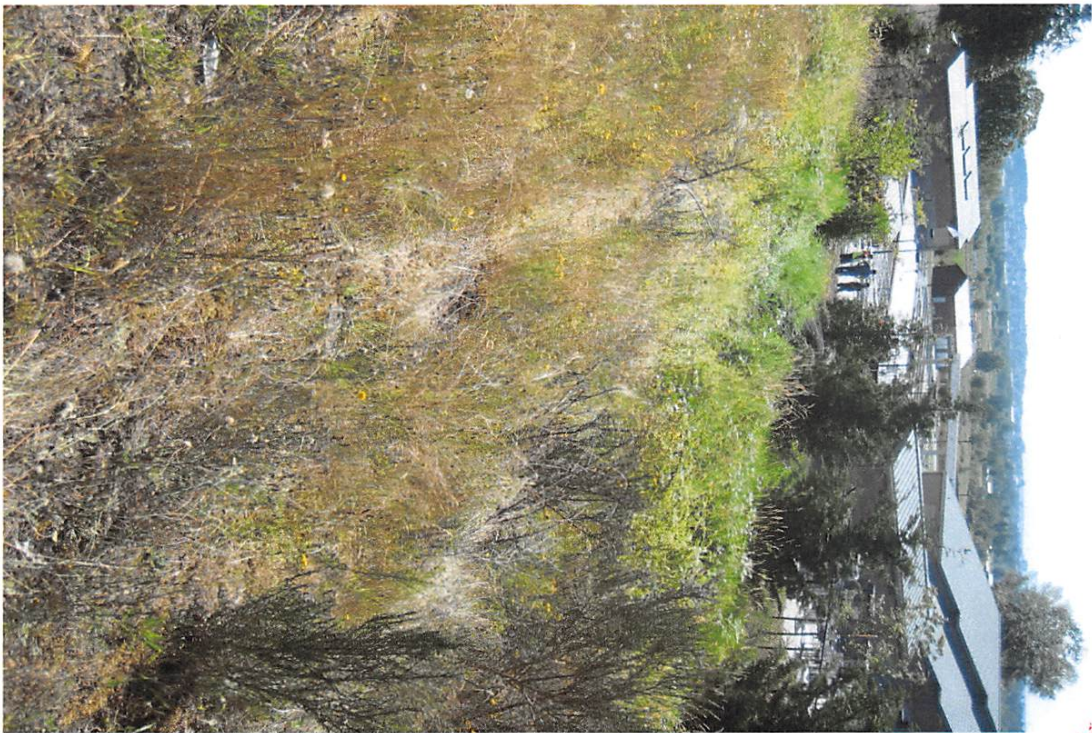
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## COLLISION REPORT 16-00013081, 070616

STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT

1591971

REPORT NO. **E561372**CASE # **2016-00013081**LOCAL AGENCY  
CODINGTOTAL # OF  
UNITS **02** OBJECT  
STRUCT **RETAINING WALL**TRIBAL  
RESERVATIONDATE OF COLLISION **07** - **06** - **2016** TIME (2400) **1500** COUNTY # **31** MILES **0** CITY # **0664**ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒  
**SR 204** BLOCK NO. ☒ **900** MILE POST ☐DISTANCE **200** **00** MILES ☒ N ☒ E ☐ S ☒ W OF (REFERENCE OR CROSS STREET) **10TH ST SE**UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4253970691**LAST NAME **CARLSON** FIRST NAME **JOHN** MIDDLE INITIAL **M**STREET NEW ADDRESS **9210 MARKET PL #K201**CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **CARLSJM353PE** STATE **WA** SEX **M** D.O.B. **10** - **05** - **1965**ON DUTY ☐ STATUS AIRBAG **3** RESTR. **4** EJECT **1** HELMET USE **2** INJURY CLASS **5** NATURE OF INJURIES **HEAD/NECK/BACK**LICENSE PLATE # **A14800F** STATE **WA** VIN# **1B7HF1328WJ220765**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1998** MAKE **DODG** MODEL **RAMPU** STYLE VEHICLE TOWED YES ☒ NO ☐ TOWED BY **TOP NOTCH** GOVT. VEHICLE YES ☐ NO ☒REGISTERED OWNER INFO. **JOHN CARLSON 9210 MARKET PL LAKE STEVENS WA 98258 D: 4253970691**LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **AMERICAN FAMILY MUTUAL 2117-3307-01-63-FPPA-WA**VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGEUNIT 02 MOTOR VEHICLE ☐ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☒ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4253348588**LAST NAME **LAKE STEVENS SEWER** FIRST NAME **DISTRICT** MIDDLE INITIALSTREET NEW ADDRESS **7110 9TH ST SE**CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX **U** D.O.B. - -ON DUTY ☐ STATUS AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

LICENSE PLATE # STATE VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED YES ☐ NO ☐ TOWED BY GOVT. VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY #VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGEOFFICER'S NAME (PRINT) **G. HEINEMANN** BADGE OR ID # **0133** AGENCY **WA0311900**





STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E561372**CASE # **2016-00013081**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Unit 1 was traveling southbound on SR 204 in the 900 block. Unit 1 traveled over a grass embankment, through a fence, down another embankment. Once Unit 1 cleared the 2nd embankment, it continued over a cement stairway, striking the handrail and came to a stop after colliding with a large gravity thickener tank. The structural supports for the top of the tank were compressed and also damaged. The driver of unit 1 was extracted and transported to Providential Medical Center for further evaluation. The fire department cut a section of fencing east of the collision so that Top Notch Towing could access the vehicle and tow it away from the scene.

\*\*\*\* AUTO-POPULATED SECTION \*\*\*\*

THE FOLLOWING ARE DESCRIPTIONS ENTERED FOR ITEMS SELECTED AS "OTHER":

Motor Vehicle Unit 1

Roadway Surface: FROM CEMENT TO GRASS/BARK INTO STRUCTURE

\*\*\*\* END OF AUTO-POPULATED SECTION \*\*\*\*

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**G. HEINEMANN**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

**07-06-16 07:46 PM**

DATED

PLACE SIGNED

APPROVED BY

**R. BROOKS 0013**

DATE

**7/8/2016 5:30:21 AM**

BADGE OR ID #	<b>0133</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>3:05 PM</b>	TIME POLICE ARRIVED	<b>3:07 PM</b>
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REPORT NO. E561372

CASE # 2016-00013081

DATE AND TIME  
OF COLLISION 07/06/16 15:00

